

**Macon County Board of Health Meeting**

**April 21, 2020**

MCHD Main Conf. Room - Virtual Meeting in Response to the COVID-19 Pandemic  
(Governor's Executive Order 3/16/2020 Loosened OMA)

Candace Clevenger, Board of Health President, called the meeting to order at 5:32pm via virtual/phone.

**Roll Call**

Candace Clevenger, President – present/on-call  
Vivian Goodman, Vice President – present/on-call  
Paige Toth, Secretary – present/on-call  
Mary Jane Linton, Treasurer – absent  
Jan Hack – absent  
Carol Hendrian – absent  
Dr. Bret Jerger – present/on-call  
Dr. Venkat Minnaganti – absent  
Dr. Janet Patterson- present/on-call  
Phil Tibbs- present/on-call  
Laura Zimmerman- present/on-call

**Health Department Staff:**

Present:

Brandi Binkley, MPA, SHRM-CP, CPHA, Public Health Administrator  
Bethany Stapel, MPH, CPHA, Assistant Public Health Administrator  
Sandy DeDios, Administrative Assistant II

Virtual/Microsoft Teams:

Carol Carlton RN, BSN, Director of Clinical Services  
Becky Edwards, Director of Starting Point  
Marisa Hosier, Director of Health Promotions and Public Relations  
Karen Shiflett, RN, BSN, Director of WIC/FCM  
Kathy Wade, Director of Environmental Health and Emergency Preparedness  
Hannah Yasunaga DDS, Dentist/Director of Dental Division  
Sheree Zalanka, Chief Financial Officer

**Public in Attendance**

None

**Approval of Agenda Topics**

Paige Toth moved to accept the agenda, seconded by Vivian Goodman. Motion carried.

## **Public Comment**

None – No citizen remarks were received via email prior to the cutoff for this meeting.

## **Approval of Previous Meeting Minutes**

Laura Zimmerman moved to accept the minutes from the Tuesday, March 17, 2020, Board of Health meeting that was held in the MCHD WIC Conference Room that were included in the packet, seconded by Paige Toth. Motion carried.

## **Communications**

### **Board Education**

Brandi gave an update regarding COVID-19. MCHD is still conducting essential services curbside with limited visitors inside the building. We have a screening process in place to screen visitors as well as staff. Staff has strongly been advised to wear a mask while in the building and when having contact with clients and patients.

There have been several meetings held with the County Board and Finance Committee to discuss possible layoffs. We were asked what essential employees were needed and what services were mandated by law to perform. Brandi was told that this did not include the Health Department and to continue what we are doing. Brandi mentioned that she is working on several contingency plans on how to handle staff and reimplement more people back into the building depending on whether the Governor lifts the shelter in place order or extends it. Brandi appreciates the tremendous feedback that the Supervisors have provided and for continuing to offer the essential services that the community needs and doing it in a safe manner.

Brandi provided division updates starting with the Nursing Division. They are continuously monitoring cases, performing contact tracing, contacting and updating long term care facilities, doing home visits in person and virtually as grant rules have permitted.

Environmental and Emergency Preparedness Division is conducting essential services as well as working remotely. Emergency Preparedness is involved with frequent conference calls with local, state, and federal levels then relaying the updates to Emergency Operations Center. They are managing and distributing PPE to local facilities.

Dental Division is taking emergency calls and assisting patients to keep from having to visit the Emergency Room.

WIC and Family Case Management are working on site and remotely to handle their clients. WIC clients are being served curbside and has worked out well and have received a lot of positive feedback for this. 50-90% of their clients are being served every day. EBT training that had been canceled has now been rescheduled for a later date.

Starting Point services have all been provided internally, remotely, and curbside. Some home visits have been transitioned to virtual visits.

Administration has been working both internally and remotely. All fiscal processes are being completed.

Brandi extends a thank you to the board for approving the Microsoft 365 purchase for MCHD last year. It has been phenomenal to have this available to use remotely especially during this time. It allows us to maintain efficiency while working from home with working on projects, forms, having conference calls, etc.

Health Promotion/Public Relations have been working diligently to provide the COVID-19 daily press release. They are handling media calls, emails, and social media messages as these have increased significantly. Health Promotion/Public Relations has been very creative to aid in the e-learning processes with Decatur Public Schools.

Brandi asked if anyone had any questions. Laura Zimmerman asked how the MCHD payroll was funded? Sheree Zalanka, CFO, responded that 100% of the MCHD budget comes out of the Health Fund and not the General Fund. Brandi added that they are working on being proactive internally to be as fiscally responsible as possible. Due to the services we offer, we can keep most of our staff working either internally or remotely.

Brandi and Candace have been in discussion regularly regarding the disclosure of protected health information. Brandi shared with the board as to why/how the Health Department sets their guidelines on protected health information disclosure. Regular communicable disease practice is that no protected health information is shared with the media, law enforcement, or the public. This practice is to protect the privacy and safety of the individual diagnosed with a communicable disease. In the initial COVID-19 response, the OAG put out information that stated PHI could be shared with minimal disclosure. It would be allowable to share, but not required. The initial decision locally was to share this information with leadership for local first responders. Brandi reached out to other health departments to see what their practices were. She found out that some adhere to same practice we did at that time, and some are sharing limited information to law enforcement dispatch only. Brandi was then on a call with IDPH and their stance was not to share protected information with law enforcement for the fact it could offer a false sense of security, not everyone with symptoms or COVID-19 was able to be tested, and stigmatization. IDPH advises that universal precautions be used with use of PPE.

Brandi contacted the Decatur Police Department and the Macon County State's Attorney's Office to inform them that our process may change regarding the protected health information and asked them to voice any concerns they may have. Brandi also contacted CIRDC (Central IL Regional Dispatch Center) to ask how their process would work if we decided to notify them rather than making calls directly to every law enforcement entity in our community. They stated that they could input the information with a code and have a date on which the code would drop off so it wasn't there forever. They could also run names and addresses at the time of receipt of confirmed cases to determine if law enforcement had been in contact in recent days.

On a call with IDPH, they confirmed that while it was not required to share protected health information with law enforcement, but it was permissible to share. However, it was IDPH's stance that it was not the best option to share, but instead to direct all first responders to wear PPE every time. IDPH stated they would send out additional guidance/clarification about this.

Brandi waited for the additional guidance/clarification from IDPH, but that did not come on the expected date and she did not want to wait too long to make the decision on how to move forward. Brandi addressed all the concerns from all involved with our Nursing team, Medical Director, State's Attorney's Office, and the Board of Health President to get as much input to make the best decision possible. Because of the reality that local law enforcement did not have adequate PPE, Brandi (with input from others) decided ultimately to share limited information with CIRDC only.

It was decided to proceed with sharing the names and addresses of confirmed cases with CIRDC only. They will put a code on the person's name and address then this will alert CIRDC to advise first responders to take droplet precautions. The code will then be removed in 60 days. It was stressed to the CIRDC the importance of confidentiality. If a name or address would come up of a confirmed case, first responders would be advised to take appropriate PPE with them.

This process was determined to be best way to protect both the confirmed COVID-19 patient as well as the first responders. It was deemed the best way to maintain the privacy of residents and safety of first responders. All parties of local law enforcement were notified of the process changes. We requested that a HIPAA confidentiality form be signed by leadership of CIRDC and a member of leadership for every first responder agency that receives information from CIRDC. We did not wait to have those forms returned before we started to provide the information.

Brandi wanted to clarify a question that had been brought up on multiple occasions about a lawsuit against Macon County Health Department for not disclosing protected information. After checking with the State's Attorney's office, there had not been a lawsuit filed.

Brandi expressed that her team at the health department has been incredibly strong with keeping up with updating social media, website, and doing media spots throughout the day and night. Our communications team is also developing the press releases every day with information from the Crisis Communications Team. They are frequently and adequately communicating with community partners. There has been some talk within the community that we had not provided information or updates appropriately. Brandi is confident that she and her team have been communicating all information thoroughly and adequately.

Brandi addresses an issue that has been talked about in the media, regarding philosophical differences with the Crisis Communications Team at times. She advised that there have been many opinions in the way communication should be handled. Brandi feels the team has talked through things and has a better understanding on how to move forward.

Brandi also mentions another philosophical difference with the team is the identification of long-term care facilities. We have in writing from IDPH that our regular practice is not to identify the facility or a workplace with a confirmed case of COVID-19. The reason that we identified Fair Havens was that they asked the health department to assist them with getting the information out to the public as quickly as possible. Villa Clara had also said that they were going to self-identify and confirmed they were comfortable with us identifying them in our press release/communications. This information is communicated with the necessary MCHD internal teams, the Emergency Operations Center, and all other long-term care facilities. The reason for contacting long-term care facilities is because some of them share staff. So, to avoid the possible spread from one facility to another by a staff member, we decided to notify them.

We are communicating with all long-term care facilities even before the confirmed cases. We have had more frequent communication with Fair Havens in response to the outbreak there. We have taken concerns from the public and other parties regarding Fair Havens to IDPH and asked them to become more involved in the response from Fair Havens. We were notified by Fair Havens that IDPH had been at their facility. Within a few days, IDPH proceeded to conduct testing of residents and staff. Appropriate family members of the residents have been contacted. Test results expected to be complete within 24-48 hours. We anticipate that the total number of confirmed cases could spike. All appropriate partners have been notified of this information. This could increase the number for contact tracing by nursing staff at the health department and have trained additional staff to assist with contact tracing to prepare for this.

### **Statements of Economic Interest**

Brandi reminded board members to complete and turn these in if they have not done so already.

### **Building Security Assessment**

Brandi assessed the security need at the health department both internally and spoke to other health departments. We currently have security in the building two afternoons a week. We feel that we do not need full time security at this time. This information is provided in follow-up to one of Brandi's annual goals.

### **Presentation and Acceptance of Financial Report**

Sheree Zalanka, CFO, presented the financial report through the end of March, we are 33% into the fiscal year. Accounts Receivable is \$583,090.87 and Deferred Revenue is \$272,030.28. Ending fund balance is \$4,902,726.83. Total Revenue is \$2,215,311.68, which is 34% of budgeted revenue for the year. Total Expenditures are \$1,899,332.94, which is 29.4% of budgeted expenditures. Laura Zimmerman moved to accept the Financial Report, seconded by Janet Patterson. Motion carried.

### **Review of Department Expenditures**

Vivian Goodman moved to pay the bills, seconded by Paige Toth. Motion carried.

### **Grant Applications and Review**

Macon County Health Department has applied for COVID—19 Crisis Grant –2020 offered by Illinois Department of Public Health (IDPH). We requested \$72,319 to cover basic costs such as salary of employees working on the response.

Janet Patterson made the motion, and Laura Zimmerman seconded to accept the Grant Applications for Review, motion carried.

### **Department and Division Reports**

Included in packets

### **Employee Recognition**

Candace Clevenger acknowledged all employees on the monthly certificate and thanked them for their years of service and hard work. Included in packets.

### **Old Business**

#### **Board of Health Vacancies**

Jan Hack and Laura Zimmerman have agreed to remain on the board of health. Carol Hendrian has declined to remain on the board at this time. This opens a vacancy to fill on the board. Brandi asked if anyone had ideas for a replacement, to let her or Candace know.

#### **Nominating Committee Review**

The Nominating Committee did not have a report at this time. Therefore, Brandi asked if this item could be moved to next month. The BOH agreed to do this.

### **New Business**

#### **Resolutions**

##### *Care Coordination Units (CCU) Technology*

Whereas the Health Department has just received notification of the Care Coordination Units (CCU) Technology grant agreement with the Illinois Department on Aging and provision for this grant was not included in the FY 20 budgets; and unforeseen circumstances have arisen which give rise to an emergency situation in that valuable services will be compromised, and grant funding lost without the amending of the Health Fund budget; and the purpose of the grant is to fill the profound need for enhanced technological resources for the CCUs to sustain their operations as the COVID-19 crisis continues; and \$18,400 will be received for remote work strategies and enhanced technology to further ensure the health, safety, and welfare of vulnerable older adults residing in Illinois; and funding may be used to purchase hardware and/or devices which will allow for electronic signatures, Microsoft Windows 10, desktop or laptop computers, printers, scanners, photo equipment, tablets, cell phones, Wi-Fi hot spots, Adobe Acrobat Pro DC and related fees.

Paige Toth moved to accept the resolution, seconded by Vivian Goodman. Motion carried.

*Emergency Assistance Services*

Whereas the Health Department has just received notification of the Emergency Assistance Services grant agreement with the Illinois Department on Aging; and provision for this grant was not included in the FY 20 budgets; and unforeseen circumstances have arisen which give rise to an emergency situation in that valuable services will be compromised, and grant funding lost without the amending of the Health Fund budget; and the purpose of the grant is to reach seniors in need of assistance in Illinois during the COVID-19 state of emergency; and up to \$65,226 will be received; and funding may be used to purchase items/goods such as: nutritional needs, personal care and sanitation needs, medical supplies, transportation services and other items subject to consideration and approval.

Laura Zimmerman moved to accept the resolution, seconded by Phil Tibbs. Motion carried.

**Closed Session**

Review next meeting

**Adjournment**

Vivian Goodman moved to adjourn, seconded by Laura Zimmerman. Meeting adjourned at 6:16p.m.

Respectfully Submitted,

Sandy DeDios  
Administrative Assistant II

President: \_\_\_\_\_

Secretary: \_\_\_\_\_

Date: \_\_\_\_\_